| Schedule E)  | EXI END       | TOTILO                |                   | PAGE 1<br>FOR SE 0                            | OF 32<br>F FORM 24/48 |
|--|---------------|-----------------------|-------------------|---|-----------------------|
| NAME OF COMMITTEE (In Full)  |               |                       |                   | FEC IDENTIFICAT                               |                       |
| Workers' Voice   |               |                       |                   | C C00484287                                   |                       |
| Check if 24-hour report 48-hour report   | New repo      | ort X Amends repo     | ort filed on      | 10 / 22                                       | 2014                  |
| Full Name of Payee AKPD Message & Media LLC  |               |                       | Dat               | e of Public Distribution                      | Y Y Y Y Y             |
| Mailing Address 730 North Franklin Street, #404  |               |                       | Am                | 10 21<br>punt                                 | 2014                  |
| '  |               | Zip Code              |                   |   | 127642.60             |
| Chicago  | IL            | 60654                 |                   | nsaction ID : D553262<br>e of Disbursement or |                       |
| Purpose of Expenditure<br>Radio Ad   |               | Category/<br>Type 004 |                   | 10 / 21                                       | 2014                  |
| Name of Federal Candidate  |               | Support               | Office Sou        | ght: House                                    | District:00           |
| JONI K ERNST   |               | X Oppose              | Pres              | dent Senate                                   | State:IA              |
| Calendar Year-To-Date Per Election for Office Sought   | 1             | 29059.35              | Disbursem<br>2014 | ent For: Primar Other (specify) ▶             | y X General           |
| Full Name of Payee COMMITTEE ON LETTER CARRIERS I  | POLITICA      | L EDUCATION           | Dat               | e of Public Distribution                      | n/Dissemination       |
| Mailing Address 100 Indiana Avenue, N.W.   |               |                       | Am                | 10 21   | 2014                  |
| City   | State         | Zip Code              |                   |   | 872.00                |
|  | DC            | 20001                 |                   | saction ID : D554019<br>e of Disbursement or  | Obligation            |
| Purpose of Expenditure<br>InKind Staff   |               | Category/<br>Type 001 |                   | 10 / 21                                       | 2014                  |
| Name of Federal Candidate  |               | X Support             | Office Sou        | ght: House                                    | District: 00          |
| ALISON LUNDERGAN GRIMES  |               | Oppose                | Pres              | ident Senate                                  | State: KY             |
| Calendar Year-To-Date Per Election for Office Sought   |               | 332613.95             | Disbursem<br>2014 | ent For: Primar Other (specify) ▶             | y X General           |
| (a) SUBTOTAL of Itemized Independent Expenditures  |               |                       |                   |   | 128514.60             |
| (b) SUBTOTAL of Unitemized Independent Expenditures  | s             |                       | <b>•</b>          |   |                       |
| (c) TOTAL Independent Expenditures   |               |                       | ·· •              | 7 1 7   |                       |
| Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate of party committee) any political party committee or its age | or authorized |                       |                   |   |                       |
| Ms. Elizabeth H Shuler Signature   | [Electroni    | ically Filed] Date    | e 10              | 30 / 20                                       | 14                    |

| Schedule E)   | INDENT EXTEND             | TOTILO                |                                 | PAGE 2 OF 32<br>FOR SE OF FORM 24/48   |
|---|---------------------------|-----------------------|---------------------------------|--|
| NAME OF COMMITTEE (In Full)   |                           |                       | FEC                             | IDENTIFICATION NUMBER ▼                |
| Workers' Voice  |                           |                       | С                               | C00484287                              |
| Check if 24-hour report 48-hour re  | port New repo             | ort X Amends repo     | rt filed on 10                  | 22 2014                                |
| Full Name of Payee COMMITTEE ON LETTER CA   | RRIERS POLITICA           | L EDUCATION           | Date of Pub                     | lic Distribution/Dissemination         |
| Mailing Address 100 Indiana Avenue, N.W   |                           |                       | Amount                          |  |
| City  | State                     | Zip Code              |                                 | 6502.52                                |
| Washington  | DC                        | 20001                 |                                 | ID: D554024<br>oursement or Obligation |
| Purpose of Expenditure<br>InKind Staff  |                           | Category/<br>Type 001 | M 10                            | 21 / 2014                              |
| Name of Federal Candidate   |                           | Support               | Office Sought:                  | House District: 00                     |
| MARK BEGICH   |                           | Oppose                | President                       | Senate State: AK                       |
| Calendar Year-To-Date<br>Per Election for Office Sought   | 4                         | 46151.78              | Disbursement For: 2014 Other (s | Primary ⊠ General Specify) ►           |
| Full Name of Payee COMMITTEE ON LETTER CA   | RRIERS POLITICA           | L EDUCATION           | Date of Pub                     | olic Distribution/Dissemination        |
| Mailing Address 100 Indiana Avenue, N.  | W.                        |                       | Amount                          | 21 2014                                |
| City  | State                     | Zip Code              |                                 | 872.00                                 |
| Washington  | DC                        | 20001                 | Transaction Date of Disl        | ID: D554025<br>oursement or Obligation |
| Purpose of Expenditure<br>InKind Staff  |                           | Category/<br>Type 001 | M 10                            | 21 / 2014                              |
| Name of Federal Candidate   |                           | Support               | Office Sought:                  | House District:00                      |
| MITCH MCCONNELL   |                           | X Oppose              | President                       | Senate State: KY                       |
| Calendar Year-To-Date Per Election for Office Sought  |                           | 332613.95             | Disbursement For: 2014 Other (s | Primary X General                      |
| (a) SUBTOTAL of Itemized Independent Ex   | penditures                |                       | <b>•</b>                        | 7374.52                                |
| (b) SUBTOTAL of Unitemized Independent  | Expenditures              |                       | •                               |  |
| (c) TOTAL Independent Expenditures  |                           |                       | ·                               |  |
| Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party committee | y candidate or authorized |                       |                                 |  |
| Ms. Elizabeth H Shuler Signature  | [Electroni                | ically Filed] Date    | 10 / 30                         | 2014                                   |

|   |                                 |                        | FOR SE OF FORM 24/48   |
|---|---------------------------------|------------------------|--|
| NAME OF COMMITTEE (I                    | n Full)                         |                        | FEC IDENTIFICATION NUMBER ▼  |
| Workers' Voice                          |                                 |                        | C C00484287  |
| Check if 24-hour repo                   | rt 48-hour report New rep       | ort X Amends report fi | led on 10 22 / 2014  |
| Full Name of Payee COMMITTEE O          | N LETTER CARRIERS POLITICA      | AL EDUCATION           | Date of Public Distribution/Dissemination  |
| Mailing Address 100 li                  | ndiana Avenue, N.W.             |                        | 10 21 2014<br>Amount   |
|   |                                 |                        |  |
| City<br>Washington                      | State<br>DC                     | Zip Code<br>20001      | 2035.72  Transaction ID : D554026  Date of Disbursement or Obligation                              |
| Purpose of Expenditure InKind Staff     |                                 | Category/<br>Type 001  | 10   |
| Name of Federal Cand                    | idate                           | X Support Of           | ffice Sought: House District: 00   |
| MARK E UDALL                            |                                 | Oppose                 | President X Senate State: CO   |
| Calendar Year-To-<br>Per Election for C |                                 |                        | sbursement For: Primary X General  114 Other (specify) ▶   |
| Full Name of Payee                      |                                 |                        | Date of Public Distribution/Dissemination  |
|   | N LETTER CARRIERS POLITICA      | AL EDUCATION           | 10 21 2014   |
| Mailing Address 100                     | Indiana Avenue, N.W.            |                        | Amount   |
| City                                    | State                           | Zip Code               | 49.13  |
| Washington                              | DC                              | 20001                  | Transaction ID : D554030  Date of Disbursement or Obligation                                       |
| Purpose of Expenditur<br>InKind Staff   | e                               | Category/<br>Type 001  | 10 21 2014   |
| Name of Federal Cand                    | lidate                          | X Support O            | ffice Sought: X House District: 02   |
| GWEN GRAHAM                             |                                 | Oppose                 | President Senate State: FL   |
| Calendar Year-To-<br>Per Election for C |                                 |                        | isbursement For: Primary General O14 Other (specify)   |
| (a) SUBTOTAL of Itemi                   | zed Independent Expenditures    | ·····                  | 2084.85  |
| (b) SUBTOTAL of Unite                   | emized Independent Expenditures | •                      |  |
| (c) TOTAL Independent                   | Expenditures                    | ·                      |  |
| with, or at the request of              |                                 |                        | made in cooperation, consultation, or concert ther, or (if the reporting entity is not a political |
| Ms. Elizabe                             |                                 | ically Filed] Date     | 10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Signature                               |                                 |                        |  |

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| Schedule E)                                      | OI INDEFENDENT              | LAFLINDI      | TONES                 |               | PAGE 4 OF 32<br>FOR SE OF FORM 24/48   |
|--|-----------------------------|---------------|-----------------------|---------------|--|
| NAME OF COMMITTEE (In Ful                        | II)                         |               |                       |               | FEC IDENTIFICATION NUMBER ▼  |
| Workers' Voice                                   |                             |               |                       |               | C C00484287  |
| Check if 24-hour report                          | 48-hour report              | New repo      | ort X Amends rep      | ort filed     | on 10 22 2014  |
| Full Name of Payee<br>NATIONAL AIR TRAFFIC CONTR | OLLERS ASSOCIATION POLITICA | AL ACTION COM | MITTEE (AKA NATCA PAC | C)            | Date of Public Distribution/Dissemination  |
| Mailing Address 1325 Mass                        | sachusetts Ave. NW          |               |                       |               | Amount   |
| City   | S                           | state         | Zip Code              |               | 126.92   |
| Washington                                       |                             | DC            | 20005                 |               | Transaction ID : D554033 Date of Disbursement or Obligation                                      |
| Purpose of Expenditure InKind Staff              |                             |               | Category/<br>Type 001 |               | M M / D D / Y Y Y Y 1 1 2014   |
| Name of Federal Candidate                        | )                           |               | Support               | Office        | Sought: House District:00  |
| MARK E UDALL                                     |                             |               | Oppose                |               | President Senate State: CO   |
| Calendar Year-To-Date<br>Per Election for Office | Sought                      | 2             | 99421.89              | Disbu<br>2014 | rsement For:  Primary  General  Other (specify) ▶  |
| Full Name of Payee                               |                             |               |                       |               | Date of Public Distribution/Dissemination  |
| Grassroots Solution                              | S<br>                       |               |                       |               | 10 21 / 2014   |
| Mailing Address 2828 Ur                          | niversity Avenue SE, #150   |               |                       |               | Amount   |
| City   | S                           | State         | Zip Code              |               | 150.09   |
| Minneapolis                                      |                             | MN            | 55414                 |               | Transaction ID : D554039  Date of Disbursement or Obligation                                     |
| Purpose of Expenditure<br>Canvassers             |                             |               | Category/<br>Type 001 |               | 10 / 21 / Y Y Y Y Y Y Y  |
| Name of Federal Candidate                        | 9                           |               | X Support             | Office        | Sought: House District: 00   |
| GARY PETERS                                      |                             |               | Oppose                |               | President Senate State: MI   |
| Calendar Year-To-Date<br>Per Election for Office | Sought                      |               | 135325.25             | Disbu<br>2014 | rrsement For:  Primary   |
| (a) SUBTOTAL of Itemized                         | Independent Expenditures    |               |                       | ▶             | 277.01   |
| (b) SUBTOTAL of Unitemize                        | ed Independent Expenditure  | s             |                       | ··· <b>•</b>  |  |
|  |                             |               |                       |               | 7  |
| (c) TOTAL Independent Exp                        | enditures                   |               |                       | ··· <b>•</b>  | 7 7  |
|  | ggestion of, any candidate  | or authorized |                       |               | de in cooperation, consultation, or concert<br>c, or (if the reporting entity is not a political |
| Ms. Elizabeth H S                                | Shuler                      | [Electroni    | cally Filed] Dat      | te 1          | 0 30 2014  |
| Oigilatai0                                       |                             |               |                       |               |  |

|   | FOR SE OF FORM 24/48   |
|---|--|
| NAME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼  |
| Workers' Voice  | C C00484287  |
| Check if 24-hour report 48-hour report New report Amends report fi  | led on 10 22 2014  |
| Full Name of Payee Grassroots Solutions   | Date of Public Distribution/Dissemination  |
| Grassioots Solutions  | 10 21 2014   |
| Mailing Address 2828 University Avenue SE, #150   | Amount   |
| City State Zip Code   | 150.09   |
| Minneapolis MN 55414  | Transaction ID : D554040  Date of Disbursement or Obligation                             |
| Purpose of Expenditure Canvassers  Category/ Type 001   | 10 21 / 2014   |
| Name of Federal Candidate Support Of  | ffice Sought: House District: 00   |
| TERRI LYNN LAND Oppose  | President Senate State: MI   |
|   | sbursement For: Primary X General  |
| Tel Election of Cines cought  | Other (specify) ▶  |
| Full Name of Payee<br>International Union of Painters and Allied Trades Political Action Together Political Comm  | Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Mailing Address 1750 New York Avenue, NW  | Amount   |
| City State Zip Code   | 577.44   |
| Washington DC 20006   | Transaction ID : D554044  Date of Disbursement or Obligation                             |
| Purpose of Expenditure InKind Staff Category/ Type 001  | 10 / 21 / 2014   |
| Name of Federal Candidate Support O   | ffice Sought: House District: 00   |
| ALISON LUNDERGAN GRIMES Oppose  | President State: KY  |
|   | isbursement For: Primary General Other (specify)   |
| (a) SUBTOTAL of Itemized Independent Expenditures   | 727.53   |
| (b) SUBTOTAL of Unitemized Independent Expenditures   | 7 7 7  |
| (c) TOTAL Independent Expenditures  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of ei party committee) any political party committee or its agent. |  |
| Ms. Elizabeth H Shuler [Electronically Filed] Date  | 10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Signature   |  |

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OF

| Schedule E)   |                                | 10.120                |                                 | PAGE 6 OF 32<br>FOR SE OF FORM 24/48      |
|---|--------------------------------|-----------------------|---------------------------------|---|
| NAME OF COMMITTEE (In Full)   |                                |                       | FEC                             | IDENTIFICATION NUMBER ▼                   |
| Workers' Voice  |                                |                       | С                               | C00484287                                 |
| Check if 24-hour report 48-hour   | report New repo                | ort X Amends repo     | ort filed on 10                 | 22 2014                                   |
| Full Name of Payee<br>International Union of Painters and Allie   | d Trades Political Action Toge | ether Political Comm  | Date of Pub                     | lic Distribution/Dissemination            |
| Mailing Address 1750 New York Avenu   | e, NW                          |                       | Amount                          | 21 2014                                   |
| City  | State                          | Zip Code              |                                 | 577.44                                    |
| Washington  | DC                             | 20006                 |                                 | ID: D554045<br>pursement or Obligation    |
| Purpose of Expenditure<br>InKind Staff  |                                | Category/<br>Type 001 | 10                              | 21 / 2014                                 |
| Name of Federal Candidate   |                                | Support               | Office Sought:                  | House District:00                         |
| MITCH MCCONNELL   |                                | X Oppose              | President                       | Senate State: KY                          |
| Calendar Year-To-Date<br>Per Election for Office Sought   | 3                              | 332613.95             | Disbursement For: 2014 Other (s | Primary ⊠ General specify) ►              |
| Full Name of Payee UNITE HERE Local 24  Mailing Address 300 River Place Driv  | re Suite 2700                  |                       | Date of Pub  M 10  Amount       | olic Distribution/Dissemination           |
|   |                                |                       |                                 |   |
| City  Detroit   | State<br>MI                    | Zip Code<br>48207     | Transaction                     | 51.68 ID: D554049 bursement or Obligation |
| Purpose of Expenditure<br>InKind Staff  |                                | Category/<br>Type 001 | Date of Dist                    | 21 / 2014                                 |
| Name of Federal Candidate   |                                | Support               | Office Sought:                  | House District: 00                        |
| TERRI LYNN LAND   |                                | X Oppose              | President                       | Senate State: MI                          |
| Calendar Year-To-Date<br>Per Election for Office Sought   | 1 7 1 7                        | 135325.25             | Disbursement For: 2014 Other (s | Primary X General                         |
| (a) SUBTOTAL of Itemized Independent  | Expenditures                   |                       | <b>&gt;</b>                     | 629.12                                    |
| (b) SUBTOTAL of Unitemized Independent  | ent Expenditures               |                       | ·· •                            | 492 1 492                                 |
| (c) TOTAL Independent Expenditures  |                                |                       | <b>&gt;</b>                     | 7 1 7                                     |
| Under penalty of perjury I certify that th with, or at the request or suggestion of, party committee) any political party committee | any candidate or authorized    |                       |                                 |   |
| Ms. Elizabeth H Shuler  | [Electron                      | ically Filed] Date    | 9 10 30                         | 2014                                      |
| Signature   |                                |                       |                                 |   |

| Schedule          | e E)  | NDENT EXPEND            | TOTILS                |  | PAGE 7 OF 32<br>FOR SE OF FORM 24/48   |
|-------------------|---|-------------------------|-----------------------|--|--|
|                   | COMMITTEE (In Full)                                   |                         |                       |  | FEC IDENTIFICATION NUMBER ▼  |
| vvorker           | s' Voice  |                         |                       |  | C C00484287  |
| Check if 2        | 24-hour report 48-hour rep                            | port New repo           | ort X Amends repo     | rt filed on  | 10 22 2014   |
|                   | me of Payee<br>FE HERE Local 24                       |                         |                       |  | of Public Distribution/Dissemination   |
| Mailing           | Address 300 River Place Drive Suit                    | e 2700                  |                       | Amou   | 10 21 2014<br>nt   |
| City              |   | State                   | Zip Code              |  | 51.68  |
| Detroit           |   | MI                      | 48207                 |  | action ID : D554050 of Disbursement or Obligation                                |
| Purpose<br>InKind | e of Expenditure<br>Staff                             |                         | Category/<br>Type 001 |  | 10 21 2014   |
| Name o            | of Federal Candidate                                  |                         | Support               | Office Sough   | t: House District: 00  |
| GARY              | PETERS  |                         | Oppose                | Preside  |  |
|                   | llendar Year-To-Date<br>r Election for Office Sought  | , 1                     | 35325.25              | Disbursemen 2014 O   | t For: Primary   |
|                   | me of Payee<br>es of the Amer. Federation             | of Gov't Employee       | es                    |  | of Public Distribution/Dissemination   |
| Mailing           | Address 80 F Street, NW                               |                         |                       | Amou   | 10 21 2014   |
| City              |   | State                   | Zip Code              |  | 109.80   |
| Washii            |   | DC                      | 20001                 |  | oction ID : D554053 of Disbursement or Obligation                                |
| Purpose<br>InKind | e of Expenditure<br>Staff                             |                         | Category/<br>Type 001 | To the state of th | 10 21 / 2014   |
| Name o            | of Federal Candidate                                  |                         | X Support             | Office Sough   | it: House District: 00   |
| GARY              | PETERS  |                         | Oppose                | Preside  |  |
|                   | alendar Year-To-Date<br>er Election for Office Sought |                         | 135325.25             | Disbursemen<br>2014 C  | ther (specify) ►   |
| (a) SUB           | TOTAL of Itemized Independent Ex                      | penditures              |                       | •  | 161.48   |
| (b) SUB           | TOTAL of Unitemized Independent                       | Expenditures            |                       |  |  |
|                   |   |                         |                       |  | 7 7 7  |
| (c) TOTA          | AL Independent Expenditures                           |                         |                       | ·  | 7  |
| with, or a        |   | candidate or authorized |                       |  | cooperation, consultation, or concert<br>the reporting entity is not a political |
| Signa             | Ms. Elizabeth H Shuler                                | [Electroni              | ically Filed] Date    | 10   | 30 / 2014  |
| Sigila            |   |                         |                       |  |  |

|     |   | FOR SE OF FORM 24/48   |
|-----|---|--|
|     | ME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼                                  |
| VV  | orkers' Voice   | C C00484287  |
| Che | eck if X 24-hour report 48-hour report New report X Amends report filed   | I on 10 22 2014  |
| T   | Full Name of Payee Voices of the Amer. Federation of Gov't Employees  | Date of Public Distribution/Dissemination                    |
|     | . ,   | 10 21 2014   |
|     | Mailing Address 80 F Street, NW   | Amount   |
| ŀ   | City State Zip Code   | 0.32   |
|     | Washington DC 20001   | Transaction ID : D554054  Date of Disbursement or Obligation |
|     | Purpose of Expenditure Inkind Staff Travel Category/ Type 002   | 10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                    |
| ı   | Name of Federal Candidate Support Offic   | e Sought: House District: 00                                 |
|     | CORY GARDNER Oppose   | President State: CO  |
|     | Calendar Year-To-Date Per Election for Office Sought  Disb 299421.89  | ursement For: Primary  |
| ľ   | Full Name of Payee  | Date of Public Distribution/Dissemination                    |
|     | Voices of the Amer. Federation of Gov't Employees   | 10 21 2014   |
|     | Mailing Address 80 F Street, NW   | Amount   |
| ŀ   | City State Zip Code   | 180.00   |
|     | Washington DC 20001   | Transaction ID : D554056  Date of Disbursement or Obligation |
|     | Purpose of Expenditure Inkind Staff Travel Category/ Type 002   | 10 / 21 / 2014   |
|     | Name of Federal Candidate Support Office  | e Sought: House District: 00                                 |
|     | MITCH MCCONNELL Oppose  | President State: KY  |
|     | Calendar Year-To-Date Per Election for Office Sought  Disb 2014   | ursement For:  Primary                                       |
| (   | a) SUBTOTAL of Itemized Independent Expenditures  | 180.32   |
| (   | b) SUBTOTAL of Unitemized Independent Expenditures  |  |
| (   | c) TOTAL Independent Expenditures   |  |
| ٧   | Under penalty of perjury I certify that the independent expenditures reported herein were not movith, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent. |  |
|     | Ms. Elizabeth H Shuler  [Electronically Filed] Date   | 10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                    |
|     | Signature   |  |

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|    |   | FOR SE OF FORM 24/48   |
|----|---|--|
|    | ME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼                                  |
| ۷۱ | /orkers' Voice  | C C00484287  |
| Ch | eck if X 24-hour report 48-hour report New report X Amends report filed   | on 10 / 22 / 2014  |
| I  | Full Name of Payee  | Date of Public Distribution/Dissemination                    |
| 1  | Voices of the Amer. Federation of Gov't Employees   | 10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                    |
|    | Mailing Address 80 F Street, NW   | Amount   |
|    | City State Zip Code   | 453.29   |
|    | Washington DC 20001   | Transaction ID : D554057 Date of Disbursement or Obligation  |
|    | Purpose of Expenditure InKind Staff Category/ Type 001  | 10 / 21 / 2014   |
|    | Name of Federal Candidate Support Office  | Sought: House District: 00                                   |
| 1  | ALISON LUNDERGAN GRIMES Oppose  | President State: KY  |
|    | Calendar Year-To-Date Per Election for Office Sought  Disbut 2014   | rsement For: Primary ⊠ General  Other (specify) ▶            |
|    | Full Name of Payee Voices of the Amer. Federation of Gov't Employees  | Date of Public Distribution/Dissemination                    |
|    | Mailing Address 80 F Street, NW   | Amount   |
| 1  | City State Zip Code   | 106.15   |
|    | Washington DC 20001   | Transaction ID : D554058  Date of Disbursement or Obligation |
|    | Purpose of Expenditure Inkind Staff Travel  Category/ Type  002   | 10 21 / 2014   |
| 1  | Name of Federal Candidate Support Office  | e Sought: House District: 00                                 |
|    | MARK E UDALL Oppose   | President State: CO  |
|    | Calendar Year-To-Date Per Election for Office Sought  Disbut 2014   | ursement For: Primary X General  Other (specify) ▶           |
|    | (a) SUBTOTAL of Itemized Independent Expenditures   | 559.44   |
|    | (b) SUBTOTAL of Unitemized Independent Expenditures   |  |
|    | (c) TOTAL Independent Expenditures  |  |
| ١  | Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent. |  |
|    | Ms. Elizabeth H Shuler  [Electronically Filed] Date   | 0 30 2014  |
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| ooneddie Ej  | FOR SE OF FORM 24/48   |
|--|--|
| NAME OF COMMITTEE (In Full)  | FEC IDENTIFICATION NUMBER ▼                                      |
| Workers' Voice   | C C00484287  |
| Check if 24-hour report 48-hour report New report Amends report filed on   | 10 22 2014   |
|  | te of Public Distribution/Dissemination                          |
| Voices of the Amer. Federation of Gov't Employees  | 10 21 2014   |
| Mailing Address 80 F Street, NW  | nount  |
| City State Zip Code  | 109.80   |
| Washington DC 20001 Tra  | ansaction ID : D554065   |
| Purpose of Expenditure InKind Staff Category/ Type 001   | te of Disbursement or Obligation  10 21 2014                     |
| Name of Federal Candidate Support Office Sou   | ught: House District: 00   |
| TERRIL VAN LAND  | sident X Senate State: MI  |
| Calendar Year-To-Date Per Election for Office Sought  Disbursen 2014   |  |
|  | Other (specify) ►  Interest of Public Distribution/Dissemination |
| Mailing Address 80 F Street, NW  | 10 21 2014<br>nount  |
| City State Zip Code  | 1.43   |
| Washington DC 20001 Trai   | nsaction ID : D554066  |
| Purpose of Expenditure Inkind Staff Travel Category/ Type 002  | te of Disbursement or Obligation  10 21 2014                     |
| Name of Federal Candidate Support Office Sol   | ught: X House District: 06                                       |
| ANDREW ROMANOFF Oppose Pre   | -  |
| Calendar Year-To-Date Per Election for Office Sought  Disbursen 2014   | nent For: Primary General  Other (specify)                       |
| (a) SUBTOTAL of Itemized Independent Expenditures  | 111.23   |
| (b) SUBTOTAL of Unitemized Independent Expenditures  |  |
| (c) TOTAL Independent Expenditures   |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent. |  |
| Ms. Elizabeth H Shuler [Electronically Filed] Date 10  | 30 2014  |
| Signature  |  |

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OF

| Schedule E)   |                       | PAGE 11 OF 32<br>FOR SE OF FORM 24/48                        |
|---|-----------------------|--|
| NAME OF COMMITTEE (In Full)   |                       | FEC IDENTIFICATION NUMBER ▼                                  |
| Workers' Voice  |                       | C C00484287  |
| Check if 24-hour report 48-hour report New rep  | ort X Amends report   | filed on 10 22 2014  |
| Full Name of Payee Voices of the Amer. Federation of Gov't Emplo  | yees                  | Date of Public Distribution/Dissemination                    |
| Mailing Address 80 F Street, NW   |                       | 10 21 2014<br>Amount   |
| City State  | Zip Code              | 180.00   |
| Washington DC   | 20001                 | Transaction ID : D554068  Date of Disbursement or Obligation |
| Purpose of Expenditure Inkind Staff Travel  | Category/<br>Type 002 | 10 / 21 / 2014   |
| Name of Federal Candidate   | Support (             | Office Sought: House District: 00                            |
| ALISON LUNDERGAN GRIMES   | Oppose                | President Senate State: KY                                   |
| Calendar Year-To-Date Per Election for Office Sought  |                       | Disbursement For: Primary General  Other (specify) ▶         |
| Voices of the Amer. Federation of Gov't Employee  Mailing Address 80 F Street, NW   | <b>∋s</b><br>         | 10 / 21 / 2014<br>Amount                                     |
| City State  | Zip Code              | 1330.21  |
| Washington DC   | 20001                 | Transaction ID : D554073  Date of Disbursement or Obligation |
| Purpose of Expenditure InKind Staff   | Category/<br>Type 001 | 10 21 2014   |
| Name of Federal Candidate   | X Support             | Office Sought: House District: 00                            |
| MARK BEGICH   | Oppose                | President Senate State: AK                                   |
| Calendar Year-To-Date Per Election for Office Sought  |                       | Disbursement For: Primary X General 2014 Other (specify) ▶   |
| (a) SUBTOTAL of Itemized Independent Expenditures   |                       | 1510.21  |
| (b) SUBTOTAL of Unitemized Independent Expenditures   |                       |  |
| (c) TOTAL Independent Expenditures  |                       |  |
| Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent. |                       |  |
|   | nically Filed] Date   | 10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                    |
| Signature   |                       |  |

|    |  | FOR SE OF FORM 24/48   |
|----|--|--|
|    | ME OF COMMITTEE (In Full)  | FEC IDENTIFICATION NUMBER ▼                                  |
| ۷۱ | /orkers' Voice   | C C00484287  |
| Ch | eck if $X$ 24-hour report 48-hour report New report $X$ Amends report filed  | on 10 / 22 / 2014  |
| ٦  | Full Name of Payee   | Date of Public Distribution/Dissemination                    |
|    | Voices of the Amer. Federation of Gov't Employees  | 10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                    |
|    | Mailing Address 80 F Street, NW  | Amount   |
|    | City State Zip Code  | 453.29   |
|    | Washington DC 20001  | Transaction ID : D554074 Date of Disbursement or Obligation  |
|    | Purpose of Expenditure InKind Staff  Category/ Type  001   | 10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                |
|    | Name of Federal Candidate Support Office   | Sought: House District: 00                                   |
|    | MITCH MCCONNELL Oppose   | President State: KY  |
|    | Calendar Year-To-Date Per Election for Office Sought  Disbut 2014  | rsement For:   |
|    | Full Name of Payee Voices of the Amer. Federation of Gov't Employees   | Date of Public Distribution/Dissemination                    |
|    | Mailing Address 80 F Street, NW  | Amount   |
| 1  | City State Zip Code  | 527.07   |
|    | Washington DC 20001  | Transaction ID : D554075  Date of Disbursement or Obligation |
|    | Purpose of Expenditure InKind Staff  Category/ Type  001   | 10 / 21 / 2014   |
| 1  | Name of Federal Candidate Support Office   | Sought: House District: 00                                   |
|    | MARK E UDALL Oppose  | President State: CO  |
|    | Calendar Year-To-Date Per Election for Office Sought  Disbut 2014  | orsement For: Primary X General  Other (specify) ▶           |
|    | (a) SUBTOTAL of Itemized Independent Expenditures  | 980.36   |
|    | (b) SUBTOTAL of Unitemized Independent Expenditures  |  |
|    | (c) TOTAL Independent Expenditures   |  |
| ١  | Under penalty of perjury I certify that the independent expenditures reported herein were not ma<br>with, or at the request or suggestion of, any candidate or authorized committee or agent of either<br>party committee) any political party committee or its agent. |  |
|    | Ms. Elizabeth H Shuler  [Electronically Filed] Date  Signature   | 0 30 / 2014  |
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OF

| Schedule E)  | IN EXIEND            | ITOTILO               |                         | PAGE 13 OF 32<br>FOR SE OF FORM 24/48              |
|--|----------------------|-----------------------|-------------------------|--|
| NAME OF COMMITTEE (In Full)  |                      |                       | ı                       | FEC IDENTIFICATION NUMBER ▼                        |
| Workers' Voice   |                      |                       |                         | C C00484287  |
| Check if 24-hour report 48-hour report   | New rep              | ort X Amends repo     | rt filed on 1           | 0 22 2014  |
| Full Name of Payee<br>AFSCME Special Account   |                      |                       | M                       | f Public Distribution/Dissemination                |
| Mailing Address 1625 L Street, NW  |                      |                       | Amoun                   | 10 21 2014<br>t                                    |
| City   | State                | Zip Code              |                         | 1211.63  |
| Washington   | DC                   | 20036                 |                         | ction ID : D554086<br>f Disbursement or Obligation |
| Purpose of Expenditure<br>InKind Staff   |                      | Category/<br>Type 001 | М                       | 10 21 2014   |
| Name of Federal Candidate  |                      | Support               | Office Sought:          | House District: 00                                 |
| MARK BEGICH  |                      | Oppose                | Presider                | nt Senate State: AK                                |
| Calendar Year-To-Date Per Election for Office Sought   | , ,                  | 146151.78             | Disbursement 2014 Oth   | For: Primary X General ner (specify) ▶             |
| Full Name of Payee AFSCME Special Account  |                      |                       | M                       | f Public Distribution/Dissemination                |
| Mailing Address 1625 L Street, NW  |                      |                       | Amoun                   | 10 21 2014<br>t                                    |
| City   | State                | Zip Code              |                         | 52.74  |
| Washington   | DC                   | 20036                 |                         | etion ID : D554090<br>f Disbursement or Obligation |
| Purpose of Expenditure<br>InKind Staff   |                      | Category/<br>Type 001 |                         | 10 21 2014   |
| Name of Federal Candidate  |                      | X Support             | Office Sought           | : House District:00                                |
| GARY PETERS  |                      | Oppose                | Preside                 |  |
| Calendar Year-To-Date Per Election for Office Sought   | 7                    | 135325.25             | Disbursement<br>2014 Ot | For: Primary X General                             |
| (a) SUBTOTAL of Itemized Independent Expendi   | ures                 |                       |                         | 1264.37  |
| (b) SUBTOTAL of Unitemized Independent Exper   | nditures             |                       |                         |  |
|  |                      |                       |                         | 7 4  |
| (c) TOTAL Independent Expenditures   |                      |                       | ·                       | 7  |
| Under penalty of perjury I certify that the independent, or at the request or suggestion of, any canon party committee) any political party committee or | lidate or authorized |                       |                         |  |
| Ms. Elizabeth H Shuler Signature   | [Electron            | ically Filed] Date    | 10                      | 30 / 2014  |
| Olynatul <del>C</del>  |                      |                       |                         |  |

| Schedule E)   |                          | PAGE 14 OF 32<br>FOR SE OF FORM 24/48  |
|---|--------------------------|--|
| NAME OF COMMITTEE (In Full)   |                          | FEC IDENTIFICATION NUMBER ▼  |
| Workers' Voice  |                          | C C00484287  |
| Check if 24-hour report 48-hour report New  | w report X Amends report | filed on 10 22 2014  |
| Full Name of Payee AFSCME Special Account   |                          | Date of Public Distribution/Dissemination  |
| Mailing Address 1625 L Street, NW   |                          | 10 21 2014<br>Amount   |
| City State  | Zip Code                 | 52.74  |
| Washington DC   | 20036                    | Transaction ID : D554093  Date of Disbursement or Obligation                             |
| Purpose of Expenditure<br>InKind Staff  | Category/<br>Type 001    | 10 21 / 2014   |
| Name of Federal Candidate   | Support C                | Office Sought: House District:00   |
| TERRI LYNN LAND   | X Oppose                 | President Senate State: MI   |
| Calendar Year-To-Date Per Election for Office Sought  |                          | Disbursement For: Primary General 014 Other (specify) ▶                                  |
| Full Name of Payee AFSCME Special Account  Mailing Address 1625 I Street NW   |                          | Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Mailing Address 1625 L Street, NW   |                          | Amount   |
| City State  | Zip Code                 | 115.69   |
| Washington DC  Purpose of Expenditure   | 20036                    | Transaction ID : D554094  Date of Disbursement or Obligation                             |
| Inkind Staff Travel   | Category/<br>Type 002    | 10 / 21 / 2014   |
| Name of Federal Candidate   | X Support                | Office Sought: House District: 00  |
| MARK BEGICH   | Oppose                   | President Senate State: AK   |
| Calendar Year-To-Date Per Election for Office Sought  |                          | Disbursement For: ☐ Primary ☐ General  Other (specify) ►                                 |
| (a) SUBTOTAL of Itemized Independent Expenditures   |                          | 168.43   |
| (b) SUBTOTAL of Unitemized Independent Expenditures   |                          | •  |
|   |                          |  |
| (c) TOTAL Independent Expenditures  | ·······                  |  |
| Under penalty of perjury I certify that the independent expend with, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent. |                          |  |
|   | ectronically Filed] Date | 10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y  |
| Signature   |                          |  |

|  | FOR SE OF FORM 24/48   |
|--|--|
| NAME OF COMMITTEE (In Full)  | FEC IDENTIFICATION NUMBER ▼                                  |
| Workers' Voice   | C C00484287  |
| Check if 24-hour report 48-hour report New report  | Amends report filed on 10 22 2014                            |
| Full Name of Payee   | Date of Public Distribution/Dissemination                    |
| AFL-CIO  | 10 21 2014   |
| Mailing Address 815 - 16th Street, NW  | Amount   |
| City State Zip Cod   | ode 60.86  |
| Washington DC 20006  |  |
| Purpose of Expenditure Walk Packets  Category Ty   | gory/ 004 10 21 2014   |
| Name of Federal Candidate  | Support Office Sought: House District: 00                    |
| MARK BEGICH  | Oppose President Senate State: AK                            |
| Calendar Year-To-Date Per Election for Office Sought 446151.76   | Disbursement For: Primary ☐ General 2014 ☐ Other (specify) ▶ |
| Full Name of Payee   | Date of Public Distribution/Dissemination                    |
| AFL-CIO  | 10 21 2014   |
| Mailing Address 815 - 16th Street, NW  | Amount   |
| City State Zip Cod   | ode 14.47  |
| Washington DC 20006  |  |
| Purpose of Expenditure Walk Packets Category Ty  |  |
| Name of Federal Candidate  | Support Office Sought: House District: 00                    |
| MITCH MCCONNELL  | Oppose President Senate State: KY                            |
| Calendar Year-To-Date Per Election for Office Sought 33261   | Disbursement For: Primary ☐ General 2014 Other (specify) ▶   |
| (a) SUBTOTAL of Itemized Independent Expenditures  | 75.33  |
| (b) SUBTOTAL of Unitemized Independent Expenditures  |  |
| (c) TOTAL Independent Expenditures   | ······································                       |
| Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committed party committee) any political party committee or its agent. |  |
| Ms. Elizabeth H Shuler [Electronically File  | iled] Date 10 30 2014  |
| Signature  |  |

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OF

|   | FOR SE OF FORM 24/48  |
|---|---|
| IAME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼                                       |
| Workers' Voice  | C C00484287   |
| Check if 24-hour report 48-hour report New report Amends report file  | d on 10 22 2014   |
| Full Name of Payee  | Date of Public Distribution/Dissemination                         |
| AFL-CIO   | 10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                        |
| Mailing Address 815 - 16th Street, NW   | Amount  |
| City State Zip Code   | 28.59   |
| Washington DC 20006   | Transaction ID : D554101  Date of Disbursement or Obligation      |
| Purpose of Expenditure Walk Packets  Category/ Type 004   | 10 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                          |
| Name of Federal Candidate Support Office  | ee Sought: House District: 00                                     |
| MARK E UDALL Oppose   | President Senate State: CO  |
| Calendar Year-To-Date Per Election for Office Sought  Dist. 299421.89   | oursement For: Primary General  Other (specify)   Other (specify) |
| Full Name of Payee  | Date of Public Distribution/Dissemination                         |
| AFL-CIO   | 10 21 2014  |
| Mailing Address 815 - 16th Street, NW   | Amount  |
| City State Zip Code   | 14.47   |
| Washington DC 20006   | Transaction ID : D554111 Date of Disbursement or Obligation       |
| Purpose of Expenditure Walk Packets  Category/ Type  004  | 10 / 21 / 2014  |
| Name of Federal Candidate Support Office  | ce Sought: House District: 00                                     |
| ALISON LUNDERGAN GRIMES Oppose  | President Senate State: KY  |
| Calendar Year-To-Date Per Election for Office Sought  Dist 201  | oursement For: Primary X General  Other (specify) ▶               |
| (a) SUBTOTAL of Itemized Independent Expenditures   | 43.06   |
| (b) SUBTOTAL of Unitemized Independent Expenditures   |   |
| (c) TOTAL Independent Expenditures  |   |
| Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent. |   |
| Ms. Elizabeth H Shuler [Electronically Filed] Date  | 10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                         |
| Signature   |   |

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| Schedule E)  | INI EXPEND         | ITORLS                | PAG<br>FOR                              | E 17 OF 32<br>SE OF FORM 24/48 |
|--|--------------------|-----------------------|---|--------------------------------|
| NAME OF COMMITTEE (In Full)  |                    |                       |   | FICATION NUMBER ▼              |
| Workers' Voice   |                    |                       | C C004                                  | 84287                          |
| Check if 24-hour report 48-hour report   | New rep            | ort X Amends repo     | rt filed on 10 2                        | 2014                           |
| Full Name of Payee   |                    |                       | Date of Public Dist                     | ribution/Dissemination         |
| AFL-CIO  |                    |                       |   | 21 / Y Y Y Y Y Y Y 2014        |
| Mailing Address 815 - 16th Street, NW  |                    |                       | Amount                                  |                                |
| City   | State              | Zip Code              |   | 42.70                          |
| Washington   | DC                 | 20006                 | Transaction ID : Do                     |                                |
| Purpose of Expenditure Walk Packets  |                    | Category/<br>Type 004 | M = M / D                               | 21 2014                        |
| Name of Federal Candidate  |                    | Support               | Office Sought: Ho                       | ouse District: 00              |
| TERRI LYNN LAND  |                    | X Oppose              | President X Se                          | enate State: MI                |
| Calendar Year-To-Date Per Election for Office Sought   | 7                  | 135325.25             | Disbursement For:  2014 Other (specify) | Primary Seneral                |
| Full Name of Payee   |                    |                       | Date of Public Dist                     | ribution/Dissemination         |
| AFL-CIO  |                    |                       |   | 21 2014                        |
| Mailing Address 815 - 16th Street, NW  |                    |                       | Amount                                  |                                |
| City   | State              | Zip Code              |   | 0.90                           |
| Washington   | DC                 | 20006                 | Transaction ID : D5 Date of Disbursem   |                                |
| Purpose of Expenditure Walk Packets  |                    | Category/<br>Type 004 |   | 21 2014                        |
| Name of Federal Candidate  |                    | X Support             | Office Sought: X Ho                     | ouse District: 02              |
| GWEN GRAHAM  |                    | Oppose                |   | enate State: FL                |
| Calendar Year-To-Date Per Election for Office Sought   |                    | 1462.98               | Disbursement For: 2014 Other (specify)  | Primary                        |
| (a) SUBTOTAL of Itemized Independent Expenditu   | Iroc               |                       |   | 43.60                          |
| (a) SOBTOTAL OF REINIZED INDEPENDENT EXPENDITE   | iies               |                       | -                                       | 43.60                          |
| (b) SUBTOTAL of Unitemized Independent Expendent   | ditures            |                       | <b>•</b>                                | 7                              |
| (c) TOTAL Independent Expenditures   |                    |                       | <b>&gt;</b>                             |                                |
| Under penalty of perjury I certify that the indepen<br>with, or at the request or suggestion of, any candi<br>party committee) any political party committee or it | date or authorized |                       |   |                                |
| Ms. Elizabeth H Shuler Signature   | [Electron          | nically Filed] Date   | 10 30                                   | 2014                           |
| <del>-</del>   |                    |                       |   |                                |

| Schedule E)  | EXI ENDI      | TOTILO                |                   | PAGE 18 OF 32<br>FOR SE OF FORM 24/48                    |
|--|---------------|-----------------------|-------------------|--|
| NAME OF COMMITTEE (In Full)  |               |                       |                   | FEC IDENTIFICATION NUMBER ▼                              |
| Workers' Voice   |               |                       |                   | C C00484287  |
| Check if 24-hour report 48-hour report   | New repo      | ort X Amends repo     | ort filed on      | 10 22 2014   |
| Full Name of Payee   |               |                       | Date              | e of Public Distribution/Dissemination                   |
| AFL-CIO  |               |                       |                   | 10 21 2014   |
| Mailing Address 815 - 16th Street, NW  |               |                       | Amo               | ount   |
| City   | tate          | Zip Code              |                   | 42.70  |
|  | DC            | 20006                 |                   | nsaction ID : D554121<br>e of Disbursement or Obligation |
| Purpose of Expenditure<br>Walk Packets   |               | Category/<br>Type 004 |                   | 10 21 / 2014   |
| Name of Federal Candidate  |               | X Support             | Office Sou        | ght: House District: 00                                  |
| GARY PETERS  |               | Oppose                | Pres              | ident State: MI  |
| Calendar Year-To-Date Per Election for Office Sought   | . 1           | 35325.25              | Disbursem 2014    | ent For:   |
| Full Name of Payee   |               |                       | Dat               | e of Public Distribution/Dissemination                   |
| AFT Solidarity 527   |               |                       |                   | M 10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y             |
| Mailing Address 555 New Jersey Ave. N.W.   |               |                       | Am                | ount   |
| City   | tate          | Zip Code              | $\neg$            | 354.22   |
| - rasimigai  | DC            | 20001                 |                   | saction ID : D554126<br>e of Disbursement or Obligation  |
| Purpose of Expenditure<br>InKind Staff   |               | Category/<br>Type 001 |                   | 10 / 21 / 2014   |
| Name of Federal Candidate  |               | Support               | Office Sou        | ight: House District: 00                                 |
| TERRI LYNN LAND  |               | Oppose                | Pres              | sident State: MI   |
| Calendar Year-To-Date Per Election for Office Sought   | 7             | 135325.25             | Disbursem<br>2014 | ent For:   |
| (a) SUBTOTAL of Itemized Independent Expenditures  |               |                       |                   | 396.92   |
|  |               |                       |                   | 7 7  |
| (b) SUBTOTAL of Unitemized Independent Expenditures  | s             |                       | ·· •              |  |
| (c) TOTAL Independent Expenditures   |               |                       | •                 |  |
| Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate of party committee) any political party committee or its age | or authorized |                       |                   |  |
| Ms. Elizabeth H Shuler   | [Electroni    | cally Filed] Date     | e 10              | 30 2014  |
| Signature  |               |                       |                   |  |

| Schedule E)   | VI EXI END         | TOTILO                |                         | PAGE 19 OF 32<br>FOR SE OF FORM 24/48               |
|---|--------------------|-----------------------|-------------------------|---|
| NAME OF COMMITTEE (In Full)   |                    |                       |                         | FEC IDENTIFICATION NUMBER ▼                         |
| Workers' Voice  |                    |                       |                         | C C00484287   |
| Check if 24-hour report 48-hour report  | New repo           | ort X Amends repo     | rt filed on             | 0 22 2014   |
| Full Name of Payee<br>AFT Solidarity 527  |                    |                       | M                       | f Public Distribution/Dissemination                 |
| Mailing Address 555 New Jersey Ave. N.W.  |                    |                       | Amour                   | لسندا لدا ك   |
| City  | State              | Zip Code              |                         | 410.18  |
| Washington  | DC                 | 20001                 |                         | action ID : D554133<br>f Disbursement or Obligation |
| Purpose of Expenditure<br>InKind Staff  |                    | Category/<br>Type 001 | М                       | 10 21 / 2014  |
| Name of Federal Candidate   |                    | Support               | Office Sought           | : House District: 00                                |
| MARK BEGICH   |                    | Oppose                | Preside                 | nt Senate State: AK                                 |
| Calendar Year-To-Date Per Election for Office Sought  | , 4                | 46151.78              | Disbursement<br>2014 Ot | For: Primary X General her (specify) ▶              |
| Full Name of Payee AFT Solidarity 527   |                    |                       | Date o                  | of Public Distribution/Dissemination                |
| Mailing Address   |                    |                       |                         | 10 21 7 2014  |
| 555 New Jersey Ave. N.W.  |                    |                       | Amour                   | nt  |
| City  | State              | Zip Code              |                         | 354.22  |
| Washington  | DC                 | 20001                 |                         | ction ID: D554136<br>of Disbursement or Obligation  |
| Purpose of Expenditure<br>InKind Staff  |                    | Category/<br>Type 001 |                         | 10 21 / 2014  |
| Name of Federal Candidate   |                    | X Support             | Office Sought           | : House District: 00                                |
| GARY PETERS   |                    | Oppose                | Preside                 | nt Senate State: MI                                 |
| Calendar Year-To-Date Per Election for Office Sought  | , , ,              | 135325.25             | Disbursement<br>2014 Ot | For: Primary  |
| (a) SUBTOTAL of Itemized Independent Expenditu  | res                |                       |                         | 764.40  |
| (b) CURTOTAL of Heiteriand Index and at Forest  | Phone              |                       |                         | 7 1 7 1 7 1   |
| (b) SUBTOTAL of Unitemized Independent Expendent  | litures            |                       | •                       | 7 7 7   |
| (c) TOTAL Independent Expenditures  |                    |                       | •                       |   |
| Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candic party committee) any political party committee or it | date or authorized |                       |                         |   |
| Ms. Elizabeth H Shuler Signature  | [Electron          | ically Filed] Date    | 10                      | 30 / 2014   |
| Signature   |                    |                       |                         |   |

|     |  | FOR SE OF FORM 24/48  |
|-----|--|---|
|     | ME OF COMMITTEE (In Full)  | FEC IDENTIFICATION NUMBER ▼                                 |
| ۷۱  | /orkers' Voice   | C C00484287   |
| Che | eck if X 24-hour report 48-hour report New report X Amends report filed  | on 10 / 22 / 2014   |
| T   | Full Name of Payee   | Date of Public Distribution/Dissemination                   |
| ١   | UFCW Int'l Union Working Families Advocacy Project   | 10 21 2014  |
|     | Mailing Address 1775 K Street, NW  | Amount  |
| ŀ   | City State Zip Code  | 219.08  |
|     | Washington DC 20006-1598   | Transaction ID : D554141 Date of Disbursement or Obligation |
|     | Purpose of Expenditure InKind Staff  Category/ Type  001   | 10 21 / 2014  |
| ı   | Name of Federal Candidate Support Office   | e Sought: House District:00                                 |
| ١   | GARY PETERS Oppose   | President State: MI   |
| ı   | Calendar Year-To-Date Per Election for Office Sought  Disbut   |   |
|     | Tel Election for Cinec Sought  | U Other (specify) ▶   |
|     | Full Name of Payee UFCW Int'l Union Working Families Advocacy Project  | Date of Public Distribution/Dissemination                   |
|     | Mailing Address 1775 K Street, NW  | 10 21 2014<br>Amount  |
| ı   | City State Zip Code  | 219.08  |
|     | Washington         DC         20006-1598   | Transaction ID : D554145                                    |
| ı   | Purpose of Expenditure  Labeling Staff  Category/  O01   | Date of Disbursement or Obligation                          |
|     | InKind Staff  Type  001  | 10 21 2014  |
|     | Name of Federal Candidate Support Offic  | e Sought: House District: 00                                |
|     | TERRI LYNN LAND Oppose   | President State: MI   |
|     | Calendar Year-To-Date Per Election for Office Sought  Disb 2014  | ursement For:   |
|     | (a) SUBTOTAL of Itemized Independent Expenditures  | 438.16  |
|     | (b) SUBTOTAL of Unitemized Independent Expenditures  |   |
| (   | (c) TOTAL Independent Expenditures   |   |
| ١   | Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent. |   |
|     | 2 4.10   | 0 30 2014   |
|     | Signature  |   |

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| Schedule E)   | EFENDENT EXPEND                | ITOTILO               |                                 | PAGE 21 OF 32<br>FOR SE OF FORM 24/48 |
|---|--------------------------------|-----------------------|---------------------------------|---------------------------------------|
| NAME OF COMMITTEE (In Full)   |                                |                       | FEC II                          | DENTIFICATION NUMBER ▼                |
| Workers' Voice  |                                |                       | C                               | C00484287                             |
| Check if 24-hour report 48-ho   | ur report New rep              | ort X Amends repo     | rt filed on 10                  | 22 2014                               |
| Full Name of Payee<br>UFCW Int'l Union Working  | g Families Advocacy            | Project               | Date of Publi                   | ic Distribution/Dissemination         |
| Mailing Address 1775 K Street, NW   |                                |                       | Amount                          |                                       |
| City  | State                          | Zip Code              |                                 | 84.76                                 |
| Washington  | DC                             | 20006-1598            |                                 | ID: D554149<br>ursement or Obligation |
| Purpose of Expenditure<br>InKind Staff  |                                | Category/<br>Type 001 | M 10                            | 21 2014                               |
| Name of Federal Candidate   |                                | Support               | Office Sought:                  | House District: 00                    |
| MARK E UDALL  |                                | Oppose                |                                 | Senate State: CO                      |
| Calendar Year-To-Date<br>Per Election for Office Sought   |                                | 299421.89             | Disbursement For: 2014 Other (s | Primary ⊠ General pecify) ▶           |
| Full Name of Payee<br>Workers' Voice (OPEIU)  |                                |                       | Date of Publ                    | ic Distribution/Dissemination         |
| Mailing Address 80 Eighth Ave   |                                |                       | Amount                          | 2014                                  |
| Suite 610   |                                |                       | Amount                          |                                       |
| City  | State                          | Zip Code              |                                 | 1518.24                               |
| New York  Purpose of Expenditure  | NY                             | 10011                 | Transaction I  Date of Disb     | ursement or Obligation                |
| InKind Staff  |                                | Category/<br>Type 001 | 10                              | 21 2014                               |
| Name of Federal Candidate   |                                | X Support             | Office Sought:                  | House District: 00                    |
| MARK BEGICH   |                                | Oppose                | President                       | Senate State: AK                      |
| Calendar Year-To-Date<br>Per Election for Office Sought   |                                | 446151.78             | Disbursement For: 2014 Other (s | Primary                               |
| (a) SUBTOTAL of Itemized Independent  | ent Expenditures               |                       |                                 | 1603.00                               |
| (b) SUBTOTAL of Unitemized Indepen  | ndent Expenditures             |                       | <b>&gt;</b>                     | 4-1-4-1                               |
| (c) TOTAL Independent Expenditures.   |                                |                       | ·                               |                                       |
| Under penalty of perjury I certify that with, or at the request or suggestion c party committee) any political party co | f, any candidate or authorized |                       |                                 |                                       |
| Ms. Elizabeth H Shuler Signature  | [Electron                      | ically Filed] Date    | 10 / 30                         | 2014                                  |
|   |                                |                       |                                 |                                       |

| Schedule E)   |                      |                       |                                 | PAGE 22 OF 32<br>FOR SE OF FORM 24/48  |
|---|----------------------|-----------------------|---------------------------------|--|
| NAME OF COMMITTEE (In Full)   |                      |                       | FEC                             | IDENTIFICATION NUMBER ▼                |
| Workers' Voice  |                      |                       | С                               | C00484287                              |
| Check if 24-hour report 48-hour report  | New rep              | port X Amends repo    | rt filed on 10                  | 22 2014                                |
| Full Name of Payee<br>ENGINEERS POLITICAL EDUCATION COMMI   | TTEE (EPEC)/INTE     | RNATIONAL UNION       | Date of Pub                     | lic Distribution/Dissemination         |
| Mailing Address 1125 17TH ST, NW  |                      |                       | Amount                          |  |
| City  | State                | Zip Code              |                                 | 3805.67                                |
| Washington  | DC                   | 20036                 |                                 | ID: D554152<br>oursement or Obligation |
| Purpose of Expenditure<br>InKind Staff  |                      | Category/<br>Type 001 | M 10                            | 21 2014                                |
| Name of Federal Candidate   |                      | Support               | Office Sought:                  | House District: 00                     |
| MARK BEGICH   |                      | Oppose                | President                       | Senate State: AK                       |
| Calendar Year-To-Date Per Election for Office Sought  | ,,,,                 | 446151.78             | Disbursement For: 2014 Other (s | Primary ⊠ General                      |
| Full Name of Payee Michigan State AFL-CIO General   | Fund                 |                       | M = M                           | lic Distribution/Dissemination         |
| Mailing Address 419 Washington Square, S.   | #200                 |                       | Amount                          | 21 2014                                |
| City  | State                | Zip Code              |                                 | 30.23                                  |
| Lansing   | MI                   | 48933                 | Transaction Date of Disl        |  |
| Purpose of Expenditure<br>InKind Staff  |                      | Category/<br>Type 001 | M 10                            | 21 / 2014                              |
| Name of Federal Candidate   |                      | X Support             | Office Sought:                  | House District: 00                     |
| GARY PETERS   |                      | Oppose                | President                       | Senate State: MI                       |
| Calendar Year-To-Date Per Election for Office Sought  | 7 7                  | 135325.25             | Disbursement For: 2014 Other (s | Primary ⊠ General                      |
| (a) SUBTOTAL of Itemized Independent Expen  | ditures              |                       | <b>•</b>                        | 3835.90                                |
| (b) SUBTOTAL of Unitemized Independent Exp  | enditures            |                       |                                 |  |
| (c) TOTAL Independent Expenditures  |                      |                       | ·,                              | 7 7                                    |
| Under penalty of perjury I certify that the indep<br>with, or at the request or suggestion of, any cal<br>party committee) any political party committee of | ndidate or authorize |                       |                                 |  |
| Ms. Elizabeth H Shuler Signature  | [Electron            | nically Filed] Date   | 10 / 30                         | 2014                                   |

| Schedule E)   | PAGE 23 OF 32<br>FOR SE OF FORM 24/48                        |
|---|--|
| NAME OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼                                  |
| Workers' Voice  | C C00484287  |
| Check if Z 24-hour report 48-hour report New report Amends report fi  | iled on 10 22 2014   |
| Full Name of Payee Michigan State AFL-CIO General Fund  | Date of Public Distribution/Dissemination                    |
| Mailing Address 419 Washington Square, S. #200  | Amount   |
| City State Zip Code   | 30.23  |
| Lansing MI 48933  | Transaction ID : D554162  Date of Disbursement or Obligation |
| Purpose of Expenditure InKind Staff  Category/ Type  001  | 10 21 / Y Y Y Y Y  |
| Name of Federal Candidate Support O   | ffice Sought: House District: 00                             |
| TERRI LYNN LAND Oppose  | President Senate State: MI                                   |
|   | isbursement For:   |
| Full Name of Payee  | Date of Public Distribution/Dissemination                    |
| Metro Detroit AFL-CIO General Fund  | 10 21 2014   |
| Mailing Address 600 W Lafayette, Suite 200  | Amount   |
| City State Zip Code   | 35.48  |
| Detroit MI 48226  | Transaction ID : D554164  Date of Disbursement or Obligation |
| Purpose of Expenditure InKind Staff  Category/ Type  001  | 10 21 2014   |
| Name of Federal Candidate Support O   | office Sought: House District: 00                            |
| TERRI LYNN LAND Oppose  | President Senate State: MI                                   |
|   | isbursement For:  Primary                                    |
| (a) SUBTOTAL of Itemized Independent Expenditures   | 65.71  |
| (b) SUBTOTAL of Unitemized Independent Expenditures   |  |
| (c) TOTAL Independent Expenditures  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of ei party committee) any political party committee or its agent. |  |
| Ms. Elizabeth H Shuler  [Electronically Filed] Date   | 10 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                |

| Scl | hedule E)  | EXI ENDI        | TONEO                 |                   | PAGE 24 OF 32<br>FOR SE OF FORM 24/48                       |
|-----|--|-----------------|-----------------------|-------------------|---|
|     | ME OF COMMITTEE (In Full)  |                 |                       |                   | FEC IDENTIFICATION NUMBER ▼                                 |
| VV  | orkers' Voice  |                 |                       |                   | C C00484287   |
| Che | eck if 24-hour report 48-hour report   | New repo        | ort X Amends rep      | ort filed on      | 10 22 2014  |
| T   | Full Name of Payee<br>Metro Detroit AFL-CIO General Fund   | d               |                       | Da                | ate of Public Distribution/Dissemination                    |
|     | Mailing Address 600 W Lafayette, Suite 200   |                 |                       | Am                | 10 21 2014<br>mount   |
| ŀ   | City   | State           | Zip Code              |                   | 35.48   |
|     | Detroit  | MI              | 48226                 |                   | ansaction ID : D554165<br>ate of Disbursement or Obligation |
|     | Purpose of Expenditure InKind Staff  |                 | Category/<br>Type 001 |                   | 10 / 21 / 2014  |
| T   | Name of Federal Candidate  |                 | Support               | Office Sou        | ought: House District: 00                                   |
|     | GARY PETERS  |                 | Oppose                |                   | esident State: MI   |
|     | Calendar Year-To-Date Per Election for Office Sought   | 1               | 135325.25             | Disbursen<br>2014 | ment For:  Primary  |
|     | Full Name of Payee Colorado AFL-CIO L2K  |                 |                       | Da                | ate of Public Distribution/Dissemination                    |
| Ì   | Mailing Address 140 Sheridan Blvd  |                 |                       | Am                | mount   |
| ľ   | City   | State           | Zip Code              |                   | 189.46  |
|     | Denver   | СО              | 80226                 |                   | Insaction ID : D554168<br>ate of Disbursement or Obligation |
|     | Purpose of Expenditure<br>InKind Staff   |                 | Category/<br>Type 001 | $\Box oxed{oxed}$ | 10 / 21 / 2014  |
|     | Name of Federal Candidate  |                 | X Support             | Office Sor        | ought: House District: 00                                   |
| -   | MARK E UDALL   |                 | Oppose                | Pre               | esident Senate State: CO                                    |
|     | Calendar Year-To-Date Per Election for Office Sought   | <b>y</b>        | 299421.89             | Disbursen<br>2014 | ment For:   |
| (6  | a) SUBTOTAL of Itemized Independent Expenditures   | 3               |                       |                   | 224.94  |
| (I  | b) SUBTOTAL of Unitemized Independent Expenditure  | ıres            |                       | <b>&gt;</b>       |   |
| (0  | c) TOTAL Independent Expenditures  |                 |                       | ··· • [           |   |
| W   | Under penalty of perjury I certify that the independen<br>with, or at the request or suggestion of, any candidate<br>earty committee) any political party committee or its a | e or authorized |                       |                   |   |
|     | Ms. Elizabeth H Shuler   | [Electron       | ically Filed] Dat     | te 10             | 30 / 2014   |
|     | Signature  |                 |                       |                   |   |

| Sche     | dule E)  |                           | TOTILO                 |                       | PAGE 25 OF 32<br>FOR SE OF FORM 24/48                    |
|----------|--|---------------------------|------------------------|-----------------------|--|
|          | OF COMMITTEE (In Full)   |                           |                        |                       | FEC IDENTIFICATION NUMBER ▼                              |
| VVor     | kers' Voice  |                           | C C00484287            |                       |  |
| Check    | if 24-hour report 48-hour re   | port New repo             | ort X Amends repo      | ort filed on          | 10 22 2014   |
| Fu<br>R  | II Name of Payee<br>Rocky Mountain Voter Outre   | ach, LLC                  |                        |                       | of Public Distribution/Dissemination                     |
| Ма       | ailing Address 899 Logan Street, Suite 3   | 00                        |                        | Amour                 |  |
| Cit      | tv   | State                     | Zip Code               |                       | 998.40   |
|          | enver  | СО                        | 80203                  |                       | action ID : D554174  of Disbursement or Obligation       |
|          | rpose of Expenditure<br>anvassers  |                           | Category/<br>Type 001  | M                     | 10 21 / 2014   |
| Na       | me of Federal Candidate  |                           | Support                | Office Sough          | : House District:00                                      |
| M        | ARK E UDALL  |                           | Oppose                 | Preside               | ent State: CO  |
|          | Calendar Year-To-Date Per Election for Office Sought   | 2                         | 99421.89               | Disbursement 2014 Of  | t For:   |
|          | II Name of Payee<br>ICFO/SEIU 32BJ   |                           |                        |                       | of Public Distribution/Dissemination                     |
| Ma       | ailing Address 1212 Bath Ave   |                           |                        | Amou                  | 10 21 2014   |
|          | Floor F&O  |                           |                        | 7411041               |  |
| Cit<br>A | ty<br>shland   | State<br>KY               | Zip Code<br>41101-2696 |                       | 14.58  ction ID : D554175  of Disbursement or Obligation |
|          | rpose of Expenditure<br>Kind Staff   |                           | Category/<br>Type 001  |                       | 10 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y              |
| Na       | ame of Federal Candidate   |                           | Support                | Office Sough          | t: House District: 00                                    |
| М        | ITCH MCCONNELL   |                           | X Oppose               | Preside               |  |
|          | Calendar Year-To-Date Per Election for Office Sought   |                           | 332613.95              | Disbursemen<br>2014 O | t For:   |
| (a)      | SUBTOTAL of Itemized Independent Ex  | xpenditures               |                        |                       | 1012.98  |
| (b)      | SUBTOTAL of Unitemized Independent   | Expenditures              |                        |                       |  |
| (c)      | TOTAL Independent Expenditures   |                           |                        | •                     |  |
| with     | ler penalty of perjury I certify that the i<br>, or at the request or suggestion of, an<br>y committee) any political party commit | y candidate or authorized |                        |                       |  |
| _        | Ms. Elizabeth H Shuler   | [Electroni                | cally Filed] Date      | 10                    | 30 2014  |
|          | Signature  |                           |                        |                       |  |

| Schedule E)   | INT EXI END        | TOTILO                |                    | PAGE 26 OF 32<br>FOR SE OF FORM 24/48                |  |
|---|--------------------|-----------------------|--------------------|--|--|
| NAME OF COMMITTEE (In Full)  NAME OF COMMITTEE (In Full)  |                    |                       |                    |  |  |
| Workers' Voice  |                    | C C00484287           |                    |  |  |
| Check if $\times$ 24-hour report 48-hour report New report $\times$ Amends report filed on 10 22 2014   |                    |                       |                    |  |  |
| Full Name of Payee<br>NCFO/SEIU 32BJ  |                    |                       |                    | of Public Distribution/Dissemination                 |  |
| Mailing Address 1212 Bath Ave   |                    |                       | Amou               | 10 21 2014   |  |
| Floor F&O   |                    |                       | 741100             | 411  |  |
| City  | State              | Zip Code              |                    | 14.58  |  |
| Ashland  Durage of Europediture   | KY                 | 41101-2696            |                    | saction ID : D554177 of Disbursement or Obligation   |  |
| Purpose of Expenditure<br>InKind Staff  |                    | Category/<br>Type 001 |                    | 10 / 21 / 2014                                       |  |
| Name of Federal Candidate   |                    | Support               | Office Sough       | ht: House District: 00                               |  |
| ALISON LUNDERGAN GRIMES   |                    | Oppose                | Presid             |  |  |
| Calendar Year-To-Date Per Election for Office Sought  | 3                  | 332613.95             | Disbursemen 2014   | nt For:  |  |
| Full Name of Payee  |                    |                       | Date               | of Public Distribution/Dissemination                 |  |
| AFSCME Florida Special Account  |                    |                       |                    | 10 21 2014   |  |
| Mailing Address 1625 L Street, NW   |                    |                       | Amor               | unt  |  |
| City  | State              | Zip Code              | — I I I            | 2.99   |  |
| Washington  | DC                 | 20036                 |                    | action ID : D554184<br>of Disbursement or Obligation |  |
| Purpose of Expenditure Inkind Staff Travel  |                    | Category/<br>Type 002 | ] [                | 10 / 21 / 2014                                       |  |
| Name of Federal Candidate   |                    | X Support             | Office Soug        | ht: X House District: 02                             |  |
| GWEN GRAHAM   |                    | Oppose                | Presid             | dent Senate State: FL                                |  |
| Calendar Year-To-Date Per Election for Office Sought  | , ,                | 1462.98               | Disburseme<br>2014 | nt For: Primary X General  Other (specify) ►         |  |
| (a) SUBTOTAL of Itemized Independent Expendit   | uros               |                       |                    | 17.57  |  |
| (a) CODITOTAL OF HOMELOG INCOPORTAGINE EXPONANT   |                    |                       |                    | 7 7 7  |  |
| (b) SUBTOTAL of Unitemized Independent Expen  | ditures            |                       | · • [ ]            |  |  |
| (c) TOTAL Independent Expenditures  |                    |                       | •                  |  |  |
| Under penalty of perjury I certify that the indepen<br>with, or at the request or suggestion of, any candi<br>party committee) any political party committee or i | date or authorized |                       |                    |  |  |
| Ms. Elizabeth H Shuler  | [Electron          | ically Filed] Date    | 10                 | 30 / 2014  |  |
| Signature   |                    |                       |                    |  |  |

| <u> </u>   | FOR SE OF FORM 24/48  |  |  |  |
|--|---|--|--|--|
| NAME OF COMMITTEE (In Full)  Montroyal Maio  |   |  |  |  |
| Workers' Voice   | C C00484287   |  |  |  |
| Check if Z 24-hour report 48-hour report New report Amends report filed  | on 10 / 22 / 2014   |  |  |  |
| Full Name of Payee   | Date of Public Distribution/Dissemination                   |  |  |  |
| AFSCME for Michigan  | 10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y               |  |  |  |
| Mailing Address 1625 L Street, NW  | Amount  |  |  |  |
| City State Zip Code  | 27.22   |  |  |  |
| Washington DC 20036  | Transaction ID : D554189 Date of Disbursement or Obligation |  |  |  |
| Purpose of Expenditure Inkind Staff Travel  Category/ Type  002  | 10 21 2014  |  |  |  |
| Name of Federal Candidate Support Office   | Sought: House District:00                                   |  |  |  |
| TERRITYNIN LAND  | President Senate State: MI                                  |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought  Disbur 2014  | rsement For: Primary  |  |  |  |
| Full Name of Payee AFSCME for Michigan  Mailing Address 1625 L Street, NW  | Date of Public Distribution/Dissemination                   |  |  |  |
| 1025 L Street, NW  | Amount  |  |  |  |
| City State Zip Code  | 306.57  |  |  |  |
|  | Transaction ID : D554190 Date of Disbursement or Obligation |  |  |  |
| Purpose of Expenditure Inkind Staff Travel  Category/ Type  002  | M 10  |  |  |  |
| Name of Federal Candidate Support Office   | Sought: House District:00                                   |  |  |  |
| TERRILIANIA  | President Senate State: MI                                  |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought  Disbut 2014  | rsement For: Primary X General  Other (specify) ▶           |  |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures  | 333.79  |  |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures  |   |  |  |  |
| (c) TOTAL Independent Expenditures   |   |  |  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent. |   |  |  |  |
| Ms. Elizabeth H Shuler [Electronically Filed] Date 10  | ) 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |  |  |  |
| Signature  |   |  |  |  |

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OF

| Schedule E)  | ENT EXILID            | ITOTILO               |   | PAGE 28 OF 32<br>FOR SE OF FORM 24/48          |  |
|--|-----------------------|-----------------------|---|--|--|
| NAME OF COMMITTEE (In Full)  Montroyal Voice   |                       |                       |   |  |  |
| Workers' Voice   | C                     | C00484287             |   |  |  |
| Check if 24-hour report 48-hour report New report Amends report filed on 10 22 2014  |                       |                       |   |  |  |
| Full Name of Payee<br>AFSCME for Michigan  |                       |                       | M                                       |  |  |
| Mailing Address 1625 L Street, NW  |                       |                       | Amount                                  | 21 2014  |  |
| City   | State                 | Zip Code              |   | 91.77  |  |
| Washington   | DC                    | 20036                 |   | ion ID : D554191<br>Disbursement or Obligation |  |
| Purpose of Expenditure<br>Inkind Staff Travel  |                       | Category/<br>Type 002 | 10                                      | M / D D / Y Y Y Y                              |  |
| Name of Federal Candidate  |                       | Support               | Office Sought:                          | House District: 00                             |  |
| GARY PETERS  |                       | Oppose                | President                               | Senate State: MI                               |  |
| Calendar Year-To-Date Per Election for Office Sought   | 7                     | 135325.25             | Disbursement For 2014 Other             | or:  |  |
| Full Name of Payee<br>AFSCME for Michigan  |                       |                       | Date of F                               |  |  |
| Mailing Address 1625 L Street, NW  |                       |                       | Amount                                  | 21 2014  |  |
| City   | State                 | Zip Code              |   | 303.22   |  |
| Washington   | DC                    | 20036                 |   | on ID : D554192<br>Disbursement or Obligation  |  |
| Purpose of Expenditure<br>InKind Staff   |                       | Category/<br>Type 001 | 10                                      |  |  |
| Name of Federal Candidate  |                       | Support               | Office Sought:                          | House District: 00                             |  |
| TERRI LYNN LAND  |                       | Oppose                | President                               | Senate State: MI                               |  |
| Calendar Year-To-Date Per Election for Office Sought   |                       | 135325.25             | Disbursement For 2014 Othe              | or:  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures  |                       |                       |   |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures  |                       |                       |   |  |  |
|  |                       |                       |   | 7 7  |  |
| (c) TOTAL Independent Expenditures   |                       |                       | · • • • • • • • • • • • • • • • • • • • | 7  |  |
| Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee o | ndidate or authorized |                       |   |  |  |
| Ms. Elizabeth H Shuler Signature   | [Electron             | ically Filed] Date    |   | 30 2014  |  |
| Signaturo  |                       |                       |   |  |  |

| Schedule E)  |                      | 1101120               |                          | PAGE 29 OF 32<br>FOR SE OF FORM 24/48  |
|--|----------------------|-----------------------|--------------------------|--|
| NAME OF COMMITTEE (In Full)  |                      |                       | F                        | EC IDENTIFICATION NUMBER ▼   |
| Workers' Voice   | [                    | C C00484287           |                          |  |
| Check if 24-hour report 48-hour report   | New rep              | port X Amends repo    | ort filed on 10          |  |
| Full Name of Payee<br>AFSCME for Michigan  | <u> </u>             |                       | M                        |  |
| Mailing Address 1625 L Street, NW  |                      |                       | Amount                   | 0 21 2014  |
| City   | State                | Zip Code              |                          | 303.22   |
| Washington   | DC                   | 20036                 |                          | ction ID : D554197 Disbursement or Obligation                                |
| Purpose of Expenditure<br>InKind Staff   |                      | Category/<br>Type 001 | M                        |  |
| Name of Federal Candidate  |                      | Support               | Office Sought:           | House District: 00   |
| GARY PETERS  |                      | Oppose                | Presiden                 | t Senate State: MI   |
| Calendar Year-To-Date Per Election for Office Sought   |                      | 135325.25             | Disbursement 2014 Oth    | For: Primary X General er (specify) ▶  |
| Full Name of Payee AFSCME for Michigan  Mailing Address 1625 L Street, NW  |                      |                       | М                        | Public Distribution/Dissemination  M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City   | State                | Zip Code              |                          | 1.23   |
| Washington   | DC                   | 20036                 |                          | tion ID : D554201<br>Disbursement or Obligation                              |
| Purpose of Expenditure Inkind Staff Travel   |                      | Category/<br>Type 002 |                          | 0 21 2014  |
| Name of Federal Candidate  |                      | Support               | Office Sought:           | House District: 00   |
| TERRI LYNN LAND  |                      | Oppose                | Presiden                 |  |
| Calendar Year-To-Date Per Election for Office Sought   |                      | 135325.25             | Disbursement<br>2014 Oth | For: Primary X General ner (specify) ▶                                       |
| (a) SUBTOTAL of Itemized Independent Expendi   | tures                |                       |                          | 304.45   |
| (b) SUBTOTAL of Unitemized Independent Exper   | nditures             |                       |                          | 7 1 7 1 7  |
| (c) TOTAL Independent Expenditures   |                      | <u> </u>              | · •                      | 4 1 4 1 4  |
| Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any can party committee) any political party committee or | didate or authorized |                       |                          |  |
| Ms. Elizabeth H Shuler   | [Electron            | nically Filed] Date   |                          | 30 2014  |
| Signature  |                      |                       |                          |  |

| Schedule E)   | PAGE 30 OF 32<br>FOR SE OF FORM 24/48               |  |  |  |  |
|---|---|--|--|--|--|
| NAME OF COMMITTEE (In Full)   | IDENTIFICATION NUMBER ▼                             |  |  |  |  |
| Workers' Voice  | C00484287   |  |  |  |  |
| Check if 24-hour report 48-hour report New report Amends report filed on 10 22 2014   |   |  |  |  |  |
| AFSCME for Michigan   | blic Distribution/Dissemination                     |  |  |  |  |
| Mailing Address 1625 L Street, NW Amount  | 21 2014   |  |  |  |  |
| City State Zip Code   | 13.27   |  |  |  |  |
| Washington DC 20036 Transactio  | on ID: D554202<br>sbursement or Obligation          |  |  |  |  |
| Purpose of Expenditure Inkind Staff Travel  Category/ Type 002  | 21 2014   |  |  |  |  |
| Name of Federal Candidate Support Office Sought:  | House District: 00                                  |  |  |  |  |
| GARY PETERS Oppose President  | Senate State: MI                                    |  |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought  Disbursement For 2014  Other  | : Primary X General                                 |  |  |  |  |
| Full Name of Payee Michigan Nurses Association General Account  | ıblic Distribution/Dissemination                    |  |  |  |  |
| Mailing Address 2310 Jolly Oak Road  Amount   | 21 2014   |  |  |  |  |
|   |   |  |  |  |  |
| OKOMOO 1000 I   | 18.84<br>n ID : D554218<br>sbursement or Obligation |  |  |  |  |
| Purpose of Expenditure InKind Staff  Category/ Type 001   |   |  |  |  |  |
| Name of Federal Candidate Support Office Sought:  | House District: 00                                  |  |  |  |  |
| TERRI LYNN LAND  Oppose  President  | Senate State: MI                                    |  |  |  |  |
| Calendar Year-To-Date Per Election for Office Sought  Disbursement For 2014  Other  | r:  |  |  |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures   |   |  |  |  |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures   |   |  |  |  |  |
| (c) TOTAL Independent Expenditures  | 7   |  |  |  |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |   |  |  |  |  |
| Ms. Elizabeth H Shuler  [Electronically Filed] Date 10 30   |   |  |  |  |  |

|   |  | FOR SE OF FORM 24/48  |  |  |  |
|---|--|---|--|--|--|
| NAME OF COMMITTEE (In Full)  Workere' Veice       |  |   |  |  |  |
| ۷۷  | /orkers' Voice   | C C00484287   |  |  |  |
| Che   | eck if 24-hour report 48-hour report New report Amends report filed of   | on 10 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |  |  |  |
| П   | Full Name of Payee   | Date of Public Distribution/Dissemination                     |  |  |  |
|   | Michigan Nurses Association General Account  | 10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                     |  |  |  |
|   | Mailing Address 2310 Jolly Oak Road  | Amount  |  |  |  |
| ŀ   | City State Zip Code  | 18.84   |  |  |  |
|   |  | Transaction ID : D554220 Date of Disbursement or Obligation   |  |  |  |
|   | Purpose of Expenditure InKind Staff  Category/ Type  001   | 10 21 2014  |  |  |  |
| ı   | Name of Federal Candidate Support Office   | Sought: House District:00                                     |  |  |  |
|   | GARY PETERS  | President State: MI   |  |  |  |
|   | Calendar Year-To-Date Per Election for Office Sought  Disburs 2014   | sement For:  Primary  General  Other (specify) ▶              |  |  |  |
|   | Full Name of Payee Great Lakes Regional Organizing Committee/LIUNA General Treasury  Mailing Address 8770 Bryn Mawr Ave, #1212   | Date of Public Distribution/Dissemination  10 21 2014  Amount |  |  |  |
| ŀ   | City State Zip Code  | 212.22  |  |  |  |
|   | ,  | Fransaction ID : D554221 Date of Disbursement or Obligation   |  |  |  |
|   | Purpose of Expenditure InKind Staff Category/ Type 001   | 10 21 2014  |  |  |  |
| ľ   | Name of Federal Candidate Support Office   | Sought: House District: 00                                    |  |  |  |
|   | TERRI LYNN LAND Oppose   | President State: MI Senate                                    |  |  |  |
|   | Calendar Year-To-Date Per Election for Office Sought  Disbur 2014  | sement For:   |  |  |  |
| (a) SUBTOTAL of Itemized Independent Expenditures |  |   |  |  |  |
| (   | (b) SUBTOTAL of Unitemized Independent Expenditures  | 11212   |  |  |  |
| (   | (c) TOTAL Independent Expenditures   | 1                       |  |  |  |
| ٧   | Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent. |   |  |  |  |
|   | Ms. Elizabeth H Shuler  [Electronically Filed] Date 10   | M / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                  |  |  |  |
|   | Signature  |   |  |  |  |

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|       |  |                             | FOR SE OF FORM 24/48  |
|-------|--|-----------------------------|---|
|       | OF COMMITTEE (In Full)   | FEC IDENTIFICATION NUMBER ▼ |   |
| vvor  | kers' Voice  |                             | C C00484287   |
| Check | if 24-hour report 48-hour report New rep   | port X Amends report fi     | led on 10 / 22 / 2014                                       |
| Ful   | Name of Payee<br>reat Lakes Regional Organizing Committee/LIUNA  | General Treasury            | Date of Public Distribution/Dissemination                   |
|       |  | General Treasury            | 10 / 21 / 2014  |
| Ма    | iling Address 8770 Bryn Mawr Ave, #1212  |                             | Amount  |
| Cit   | State  | Zip Code                    | 212.22  |
|       | icago IL   | 60631                       | Transaction ID: D554224  Date of Disbursement or Obligation |
|       | pose of Expenditure<br>Kind Staff  | Category/<br>Type 001       | 10 / 21 / 2014  |
| Na    | me of Federal Candidate  | X Support Of                | fice Sought: House District: 00                             |
| GA    | ARY PETERS   | Oppose [                    | President State: MI   |
|       | Calendar Year-To-Date Per Election for Office Sought   |                             | sbursement For: Primary X General  14  Other (specify) ▶    |
|       | I Name of Davis  |                             |   |
| A     | I Name of Payee<br>KPD Message & Media LLC   |                             | Date of Public Distribution/Dissemination                   |
| Ма    | iling Address 730 North Franklin Street, #404  |                             | 10 21 2014  Amount  |
| Cit   | y State  | Zip Code                    | 1416.75   |
|       | nicago IL  | 60654                       | Transaction ID : D558290 Date of Disbursement or Obligation |
|       | rpose of Expenditure<br>adio Ad Expenses   | Category/<br>Type 004       | 10 / 21 / 2014  |
| Na    | me of Federal Candidate  | Support O                   | ffice Sought: House District: 00                            |
| JC    | NI K ERNST   | Oppose [                    | President State: IA   |
|       | Calendar Year-To-Date Per Election for Office Sought   |                             | Sbursement For: Primary X General Other (specify) ▶         |
| (a)   | SUBTOTAL of Itemized Independent Expenditures  | ·····                       | 1628.97   |
| (b)   | SUBTOTAL of Unitemized Independent Expenditures  | ·····                       |   |
| (c)   | TOTAL Independent Expenditures   | ······                      | 155990.41   |
| with, | er penalty of perjury I certify that the independent expenditures or at the request or suggestion of, any candidate or authorized committee) any political party committee or its agent. |                             |   |
|       | Ms. Elizabeth H Shuler [Electron   | nically Filed] Date         | 10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y                   |
| 5     | ignature   | - · L                       |   |

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